


Fill in this information to identify your case:

Debtor 1 Derrick H. Garner
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing)
First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania 

Case number 17-11514
(If known)

☒ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
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<p>2.1 Chase National Bank</p> <p>Creditor's Name <u>700 Kansas Drive</u> <small>Number Street</small></p> <p><u>Monroe</u> <u>LA</u> <small>City State ZIP Code</small></p> <p>Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u> </u></p>	<p>Describe the property that secures the claim: <u>5127 Arbor Street Phila., PA 19120</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) <u> </u></p> <p>Last 4 digits of account number <u>4 7 9 3</u></p>	<p>\$ <u>79,692.00</u> \$ <u>70,000.00</u> \$ <u> </u></p>
<p>2.2 ALLY Financial</p> <p>Creditor's Name <u>Post Office Box 380901</u> <small>Number Street</small></p> <p><u>Trenton, NJ</u> <u>08013</u> <small>City State ZIP Code</small></p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u> </u></p>	<p>Describe the property that secures the claim: <u>GMC Hummer</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) <u> </u></p> <p>Last 4 digits of account number <u> </u></p>	<p>\$ <u>21,267.00</u> \$ <u>1,800.00</u> \$ <u> </u></p>
<p>Add the dollar value of your entries in Column A on this page. Write that number here:</p>		<p>\$ <u>100,959.00</u></p>

Debtor 1

Derrick

H.

Garner

First Name Middle Name

Last Name

Case number (if known) 17-11514

Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
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<input checked="" type="checkbox"/> Harley Davidson Creditor's Name P.O. Box 9013 Number Street Addison TX City State ZIP Code	Describe the property that secures the claim: Motorcycle	\$ 11,938.00	\$ 9,000.00	\$
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)				
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred Last 4 digits of account number 2 3 2 3				

<input type="checkbox"/> Creditor's Name Number Street City State ZIP Code	Describe the property that secures the claim: 	\$	\$	\$
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)				
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Date debt was incurred Last 4 digits of account number				

<input type="checkbox"/> Creditor's Name Number Street City State ZIP Code	Describe the property that secures the claim: 	\$	\$	\$
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)				
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Date debt was incurred Last 4 digits of account number				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$ 112,897.00